

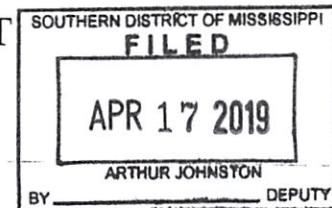
Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

## UNITED STATES DISTRICT COURT

for the

Southern District of Mississippi

Southern Division

José Joaquin Santana, Jr.

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Aaron's, Inc.

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

) Case No. 1:19cv241 HSO-JCG  
) (to be filled in by the Clerk's Office)

) ) Jury Trial: (check one)  Yes  No

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

José Joaquin Santana, Jr.

Street Address

348 Franks Dr.

City and County

Biloxi, Harrison Co.

State and Zip Code

Mississippi, 39531

Telephone Number

(228) 313-3101

E-mail Address

josejsantana@live.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

## Defendant No. 1

Name \_\_\_\_\_  
Job or Title (*if known*) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City and County \_\_\_\_\_  
State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address (*if known*) \_\_\_\_\_

Aaron's, Inc.  
(Attention Legal Department)  
400 Galleria Parkway S.E., Suite 300  
Atlanta, Fulton Co.  
Georgia, 30339  
(678) 402-3000

## Defendant No. 2

Name \_\_\_\_\_  
Job or Title (*if known*) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City and County \_\_\_\_\_  
State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address (*if known*) \_\_\_\_\_

n/a

## Defendant No. 3

Name \_\_\_\_\_  
Job or Title (*if known*) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City and County \_\_\_\_\_  
State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address (*if known*) \_\_\_\_\_

n/a

## Defendant No. 4

Name \_\_\_\_\_  
Job or Title (*if known*) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City and County \_\_\_\_\_  
State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address (*if known*) \_\_\_\_\_

n/a

## II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? *(check all that apply)*

- Federal question       Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

### A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

The Americans with Disabilities Act

### B. If the Basis for Jurisdiction Is Diversity of Citizenship

#### 1. The Plaintiff(s)

##### a. If the plaintiff is an individual

The plaintiff, *(name)* \_\_\_\_\_, is a citizen of the State of *(name)* \_\_\_\_\_.

##### b. If the plaintiff is a corporation

The plaintiff, *(name)* \_\_\_\_\_, is incorporated under the laws of the State of *(name)* \_\_\_\_\_, and has its principal place of business in the State of *(name)* \_\_\_\_\_.

*(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)*

#### 2. The Defendant(s)

##### a. If the defendant is an individual

The defendant, *(name)* \_\_\_\_\_, is a citizen of the State of *(name)* \_\_\_\_\_. Or is a citizen of *(foreign nation)* \_\_\_\_\_.

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

---

b. If the defendant is a corporation

The defendant, *(name)* \_\_\_\_\_, is incorporated under the laws of the State of *(name)* \_\_\_\_\_, and has its principal place of business in the State of *(name)* \_\_\_\_\_.  
Or is incorporated under the laws of *(foreign nation)* \_\_\_\_\_, and has its principal place of business in *(name)* \_\_\_\_\_.

*(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)*

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

---

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

*SEE ATTACHED*

---

**IV. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

*SEE ATTACHED*

**III Statement of Claim:**

Notice: José Joaquin Santana, Jr., the Plaintiff, opted out of Aaron's arbitration agreement on March 1, 2017 and kept his right to a trial by jury (see exhibit A). Permission to sue was granted by the Equal Employment Opportunity Commission (EEOC) on February 1, 2019 under Title VII, the Americans with Disabilities Act as the Plaintiff is legally blind (see exhibit B).

1. After over 12 years employed by the Defendant, Mississippi DOT regulatory changes brought to light the Plaintiff's visual disability and on January 20, 2018 the Defendant's Sr. Associate Resources Representative, Danielle Riecke, PHR,SHRM-CP (as stated in exhibit C page 2) submitted an offer to the Defendants Regional Manager, Jamie Lively, to change a verbal warning (VW) to the Plaintiff for "found dollies, tools, appliance hook ups, blankets and trash in both Aaron's vehicles for C0724." to a written warning (WW); and Cc: Christopher M. Sweeney (Regional Director). Exhibit C was emailed to the Plaintiff at store C0724 on February 9, 2018, when the Defendant's Regional Manager, Jamie Lively, included in the email a CAF (Corrective Action Form) as first step to termination for 3 occasions in 6 months the legally blind Plaintiff did not see items left in the company vehicles (See exhibit D).

2. On March 14, 2018 the Plaintiff was faxed a CAF from the Defendants Regional Manager, Jamie Lively, giving a Written Warning as the second step to termination (See Exhibit E) for a conversation between the Plaintiff and the Defendant's General Manager of C0D12, Steve Smith, that occurred on February 12, 2018, was resolved on February 15, 2018 (see exhibit F); and the Plaintiff was not allowed to submit a statement or explanation; being told by Defendants Regional Manager, Jamie Lively "it doesn't matter".

3. On May 8, 2018 the Defendant's Regional Manager, Jamie Lively & Defendant's Sr. Associate Resources Representative, Danielle Riecke, PHR, SHRM-CP gave a CAF Final Written Warning (see exhibit I pages 1-3) to the Plaintiff, after the Plaintiff's call to Aaron's Cares Hot line on April 19, 2018 (See exhibit H); this call was investigated by the Defendant's Sr. Associate Resources Representative, Danielle Riecke, PHR,SHRM-CP , via a phone conversation with the Plaintiff on April 28, 2018 (see exhibit G) and was closed September 29, 2018 stating "appropriate action has been taken" (see exhibit H).

4. On September 18, 2018 the Plaintiff's employment was terminated based on a false and uninvestigated, by the Defendant or its Representatives, though the Defendants C0724 Sales Manager Kayla Smith was present at the alleged incident/shopper complaint placed September 13, 2018 (See exhibit J & exhibit I page 3); a CAF given on May 8, 2018 that included a second-hand account of a complaint allegedly made on May 7, 2018 (see exhibit I page1); a CAF faxed to the Plaintiff on March 14th, 2018 (see exhibit E) for an issue resolved February 15, 2018 (see exhibit F) and an unknown, to the Plaintiff, incident on January 24, 2018 (see exhibit J & exhibit D)

#### **IV Relief**

The plaintiff seeks minimal punitive damages in the amount of \$4,000,000 for the mental anguish and undo stresses caused by the Defendant's representatives targeting the Plaintiff for termination when profits and sales had been holding at steady increases in the Plaintiffs store C0724 and in general through over 12 years of employment; and receiving more high marking customer surveys than shopper complaints; for singling out the Plaintiff for corrective actions with standards higher than the Defendant's representatives, Regional Manager Jamie Lively and the Defendant's Sr. Associate Resources Representative, Danielle Riecke, PHR,SHRM-CP, used in other locations concurrently with filing the Plaintiffs CAF's and under Jamie Lively's leadership and the General Manager directly following the Plaintiff in store C0724 with the same customer base.

The Plaintiff also seeks Compensatory Damages for loss of average salary to age 64 equaling \$959,446.72, loss benefits including, but not limited to, paid employee health insurance, bonuses and lost paid time off to age 64, equaling \$330,400.00. The Plaintiff seeks Compensatory damages for all court cost and expenses incurred including, but not limited to, filing, copying, legal, travel, mileage and time expenses beginning at \$1527.20 at the time of filing of this case.

In total the Plaintiff is seeking \$5,291,373.92 from the Defendant as of May 1, 2019. This total will increase as expenses are incurred until a final resolution is achieved.

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

---

---

## V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

April 15, 2019

Signature of Plaintiff



Printed Name of Plaintiff

Jose J. Santana, Jr.  
(Joaquin)

### B. For Attorneys

Date of signing:

\_\_\_\_\_

Signature of Attorney

\_\_\_\_\_

Printed Name of Attorney

\_\_\_\_\_

Bar Number

\_\_\_\_\_

Name of Law Firm

\_\_\_\_\_

Street Address

\_\_\_\_\_

State and Zip Code

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

E-mail Address

\_\_\_\_\_